FORM B PLANNING BOARD CITY OF GREENFIELD, MASSACHUSETTS

APPLICATION FOR APPROVAL OF A PRELIMINARY PLAN

	Date:			
To the Planning Board of	the City of Greenf	ïeld:		
The undersigned, being t	he applicant as defi	ned under Chap	ter 41, 81-L, for app	proval of a proposed subdivision
shown on a plan entitled:				
				by:
		dated:		and described
as follows:				located:
				number of lots
proposed:	_ total acreage of t	ract:	, hereb	y submits said plan as a
Preliminary subdivision p	olan in accordance	with the Rules a	nd Regulations of th	ne Greenfield Planning Board and
makes application to the	Board for approval	of said plan.		
_				
				and recorded in the
				, registered in the
	Registry District of	the Land Court	, Certificate of Title	No
Assessor's Map:	Lot:	Zoning	District:	
Required Frontage:	Rec	quired Lot Area	_	
Applicant:			Owner's signature	e and address if not the applicant
Applicant's Address:			_	horization if not the owner:
_				
Applicant's Signature:				
Applicant's Phone #:				
Received by City Clerk:		Received by	y Board of Health:	
Date:		Dat	te:	
Time:		Tin	ne:	
Signature:		Sig	nature:	
Appropriate Filing Fee R	eceived: \$50.00 pe	er Lot		
# of Lots:	Fee:			